



Student Absenteeism Form

If number absent due to illness is greater
than 10% of student population, please fax completed form to:
Waukesha County Public Health Division at
Fax # (262) 896-8387

Date of Report: ___/___/___ School: _____

Persons Reporting: _____ Contact phone number: _____

Number of Students in School: _____ Normal Percent Absent: ____%

Number Absent Due to Illness: _____ Percent Absent: ____%

Reasons for Absences: Mark primary reason given

Flu-Like Illness: Fever and Cough **OR** _____

Fever and Sore Throat _____

Other Respiratory Illness - **NO Fever** _____

Fever (100° or greater) _____

Nausea & Vomiting _____

Diarrhea _____

Prolonged Coughing _____

Headache _____

Rash _____

Sore/Strep Throat _____

Other (lice, pink eye, impetigo, etc) _____

Excused, Not Ill _____

Unspecified, Declined _____

Notes: _____

Please Note:

- **Please fax this form when absentee rate exceeds 10% of student population**
- Place one tick mark per absent student next to the primary reason for missing school or total number for that category
- A student who misses at least one-half of a school day is counted as one absence.
- An *illness absence* is an absence that occurs when a parent or guardian reports that the student is out of school due to illness.
 - A student who misses any part of a school day due to illness is counted as one absence (not a half absence).
 - Students who have a previously scheduled Dr/Dentist appointment are not considered absent due to illness.

Questions?

Contact: Waukesha County
Public Health
615 W Moreland Blvd
Waukesha, WI 53188
Phone: 262-896-8430
Fax: 262-896-8387